**ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THIS

EVENT, including by way ofexample and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because oftheir possible liability without fault.

I ce1tify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my paiticipation in this activity.

I acknowledge that this Accident Waiver and Release ofLiability Form will be used by the event holders, sponsors, and organizers ofthe activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration ofmy application and pe1mitting me to participate in this activity, I hereby take action for myself, my executors,

**administrators, heirs, next ofkin, successors, and assigns as follows:**

1. I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault ofthe entities or persons released, for my death, disability, personal injury, prope1ty damage, property theft, or actions ofany kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: Highland Presbyterian Church (HPC) and/or their directors, officers, employees, **volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;**
2. INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result ofpaiticipation in this activity, whether caused by the negligence of **release or otherwise,**

I acknowledge that HPC and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any patty or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test ofa person's physical and mental limits and catTies with it the potential for death, serious injury, and propetty loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack ofhydration, and actions ofother people including, but not limited to, participants, volunteers, monitors, and/or producers ofthe activity. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event ofinjury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release ofLiability Fmm shall be construed broadly to provide a release and waiver to the maximum extent pennissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant's Signature Date Participant's Name

Please Print Legibly

Age